FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL						
OMB Number:	3235-0076					
Expires:						
Estimated average burden						
hours per response	16.00					

SEC USE ONLY						
Prefix		Serial				
DA	TE RECEIVI	ED				

Name of Offering (check if this is an amendme	nt and name has changed, and indicate change.)					
Private Placement of Units of Wellesley Advis	ors Realty Fund I, LLC					
Filing Under (Check box(es) that apply): Rule	504 Rule 505 Rule 506 Section 4(6)	ULOE RECEIVED				
Type of Filing:						
	A. BASIC IDENTIFICATION DATA	4 AUG 2 2 2005)				
1. Enter the information requested about the issuer						
Name of Issuer (check if this is an amendment a	and name has changed, and indicate change.)					
Wellesley Advisors Realty Fund I, LLC		185/49				
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
88 Waverley Street, Framingham, MA 01702		508-416-2080				
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
Brief Description of Business						
Realty Investment Fund	AUG 2 S 2005 R)				
Type of Business Organization corporation business trust limited	PATTIONS ON partnership, already for the (partnership, to be formed	olease specify): limited liability company				
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General Managing Rattoca Full Name (Last name first, if individual) Wellesley Investments I, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 88 Waverley Street, Framingham, MA 01702 Check Box(es) that Apply: Promoter Beneficial Owner Z Sererakandearx Markeine Rackee Manager of Manager Full Name (Last name first, if individual) Wellesley Funds Corporation, Manager of Manager Business or Residence Address (Number and Street, City, State, Zip Code) 88 Waverley Street, Framingham, MA 01702 General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ✓ Director Managing Partner of Wellesley Funds Corporation Full Name (Last name first, if individual) Buonato, Robert E. Business or Residence Address (Number and Street, City, State, Zip Code) 88 Waverley Street, Framingham, MA 01702 Check Box(es) that Apply: Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Tessitore, Frank W. Business or Residence Address (Number and Street, City, State, Zip Code) 88 Waverley Street, Framingham, MA 01702 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Pipefitters Local Union 537 Annuity Fund Business or Residence Address (Number and Street, City, State, Zip Code) 35 Travis Street, Allston, MA 02134 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

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1.	Has the	issuer sold	L or does th	ne issuer ir	ntend to sel	II. to non-a	ccredited i	nvestors in	this offeri	ng?:		Yes	No ⊠
	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									<u></u>	<u> </u>		
2.											s 1,00	00,000.00	
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3.	Does the	offering	permit joint	ownershi	p of a sing	le unit?			,	•••••			X
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any												
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
	Name (L ene, Jer		first, if indi	vidual)								<u> </u>	
			Address (N	umber and	Street Ci	ty State 7	in Code)						
			ianapolis, !		i Street, Ci	ty, State, Z	ip code)						
			oker or Dea										
		& Associa											
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check '	'All States	" or check	individual	States)								States
	AL	AK	ĀZ	AR	CA	CO	[CT]	DE	DC	FL	GA	HI	ĪĎ
	IL	IN	IA	[KS]	KY	LA	ME	[MD]	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	M	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
		N bester	first, if indi		d Street C	ity State 1	7in Code)						
Dus.	111033 01	residence	Address (1	vuinoer an	u biroot, C	ity, Billie, 1	onp code)						
Nan	ne of Ass	ociated Br	oker or Dea	aler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						···
	(Check '	'All States	" or check	individual	States)				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	[VT]	VA	WA	WV	WI	WY	PR
Full	Name (I	ast name	first, if indi	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street. C	ity, State	Zip Code)						
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nan	ne of Ass	ociated Br	oker or De	aler									
Stat	es in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check "All States" or check individual States)								☐ Al	l States				
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate * Offering Price	Amount Already Sold
	Debt	2	\$
	Equity		_
	Common Preferred		Ψ
	Convertible Securities (including warrants)	r.	\$
	Partnership Interests		\$
	Other (Specify limited liability company units		· ————
	Total		
<u>.</u> .	Answer also in Appendix, Column 3, if filing under ULOE. * Minimum Offeri Maximum Offeri Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	ng of \$10,000	0,000
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$_5,000,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
}.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$_0.00
	Printing and Engraving Costs	Z	\$ 10,000.00
	Legal Fees		\$ 75,000.00
	Accounting Fees	_	\$ 25,000.00
	Engineering Fees		§ 0.00
	Sales Commissions (specify finders' fees separately).notpaidfromFundproceeds		§ 0.00
	Other Expenses (identify)		\$_0.00

☑ \$ 110,000.00